

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: No

Number of CD disks::

Number of copies of CDs::

Sequence submission?: Yes

Computer Readable Form (CRF)?:: Yes

Number of copies of CRF:: 1

Title :: METHODS FOR TREATMENT OF MULTIPLE  
SCLEROSIS USING PEPTIDE ANALOGUES AT  
POSITION 91 OF HUMAN MYELIN BASIC  
PROTEIN

Attorney Docket Number:: 690068.412C4

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?: No

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency:: No

Contract or Grant No::

Secrecy Order in Parent Appl.?:

**First Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Lawrence
Middle Name::	
Family Name::	Steinman
Name Suffix::	NA
City of Residence::	Palo Alto
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	877 Lincoln Street
City of mailing address::	Palo Alto
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94301

**Second Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Nicholas
Middle Name::	
Family Name::	Ling
Name Suffix::	
City of Residence::	San Diego
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	5324 Bloch Street

City of mailing address:: San Diego  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 92121

### **Third Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Paul  
Middle Name:: J  
Family Name:: Conlon  
Name Suffix::  
City of Residence:: Solana Beach  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 450 Santa Dominga  
City of mailing address:: Solana Beach  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 92075

### **Fourth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Amitabh  
Middle Name::  
Family Name:: Gaur

Name Suffix::

City of Residence:: San Diego

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 12570 Picrus Street

City of mailing address:: San Diego

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 92129

**Correspondence Information**Correspondence Customer Number :: **00500****Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation	10/270,707	10/11/02
10/270,707	Continuation	09/989,476	11/19/01
09/989,476	Continuation	08/953,937	10/20/97
08/953,937	Continuation	08/342,078	11/18/94

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	Neurocrine Biosciences, Inc.
Street of mailing address::	10555 Science Center Drive
City of mailing address::	San Diego
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	92121-1102

Assignee name::	Stanford University Medical Center
Street of mailing address::	900 Welch Road, Ste. 350
City of mailing address::	Palo Alto
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94304-1850